

**United States Bankruptcy Court
Northern District of Ohio, Toledo Division**

IN RE:**Aaron, Troy L Sr.**

Debtor(s)

Case No. 3:15-bk-33035Chapter 13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 220,000.00		
B - Personal Property	Yes	3	\$ 49,093.35		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$ 342,554.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 9,280.66	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		\$ 113,088.06	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			\$ 5,102.61
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$ 4,585.00
TOTAL		26	\$ 269,093.35	\$ 464,922.72	

**United States Bankruptcy Court
Northern District of Ohio, Toledo Division**

IN RE:**Aaron, Troy L Sr.**

Debtor(s)

Case No. 3:15-bk-33035Chapter 13**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 9,280.66
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 85,149.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 94,429.66

State the following:

Average Income (from Schedule I, Line 12)	\$ 5,102.61
Average Expenses (from Schedule J, Line 22)	\$ 4,585.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$ 5,921.01

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 98,253.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 9,280.66
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 113,088.06
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 211,341.06

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
property located at 904 Buckeye Lane Sandusky Oh	JTWROS	J	220,000.00	283,899.00
			TOTAL	220,000.00

(Report also on Summary of Schedules)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X	Cash on hand	J	100.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X	Home furnishings to include beds kitchen goods computers and televisions	J	4,500.00
4. Household goods and furnishings, include audio, video, and computer equipment.	X	Mens and womens wearing apparel	J	2,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X	Jewelry to include rings and watches	J	1,500.00
6. Wearing apparel.	X	guns and hunting equipment	J	8,000.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X	Ford Retirement Roth account	H	5,393.35
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
			HUSBAND, WIFE, JOINT, OR COMMUNITY	
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1997 MERCURY Mystique-4 Cyl. Sedan 4D 1997 Mercury Mystique VID# 1MELM653XVK622106 1998 Ford ranger Vin # 1FTYR14UXWTA80541 miles 145000 2003 Ford F150 Vin # 1FTRW07383KD86584 miles 90,000 2012 Yamha motorcycle VIN # JYAVP27EXCA015291 1,600 miles	H	1,600.00 500.00 15,000.00 10,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O T E	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
			HUSBAND, WIFE, JOINT, OR COMMUNITY	
32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.	X X X X			
				TOTAL 49,093.35

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

0 continuation sheets attached

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. *

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<u>SCHEDULE B - PERSONAL PROPERTY</u>			
Cash on hand	R.C. § 2329.66(A)(3)	100.00	100.00
Home furnishings to include beds kitchen goods computers and televisions	R.C. § 2329.66(A)(4)(a)	4,500.00	4,500.00
Mens and womens wearing apparel	R.C. § 2329.66(A)(3)	2,500.00	2,500.00
Jewelry to include rings and watches	R.C. § 2329.66(A)(4)(b)	1,500.00	1,500.00
guns and hunting equipment	R.C. § 2329.66(A)(18)	2,450.00	8,000.00
Ford Retirement Roth account	R.C. § 2329.66(A)(10)(c)	5,393.35	5,393.35
1997 MERCURY Mystique-4 Cyl. Sedan 4D 1997 Mercury Mystique VID# 1MELM653XVK622106	R.C. § 2329.66(A)(2)	1,600.00	1,600.00

* Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0430 Capital One / Yamaha 26525 N Riverwoods Blvd Mettawa, IL 60045		H	2012 Yamaha motorcycle VIN # JYAVP27EXCA015291 1,600 miles VALUE \$ 10,000.00				10,407.00	407.00
ACCOUNT NO. 9920 Nationwide Cassel Llc One Nationawide Plaza Columbus, OH 43215-2220		J	2003 Ford F150 Vin # 1FTRW07383KD86584 miles 90,000 2014-12-26 2014-12-26 VALUE \$ 15,000.00				14,301.00	
ACCOUNT NO. 3901 Regional Acceptance Corp PO Box 830913 Birmingham, AL 35283	X	W					33,947.00	33,947.00
ACCOUNT NO. 6595 Wells Fargo Home Mortgag 8480 Stagecoach Cir 2011 CV 0708 Frederick, MD 21701		H	property located at 904 Buckeye Lane Sandusky Oh VALUE \$ 220,000.00				283,899.00	63,899.00
Subtotal (Total of this page)							\$ 342,554.00	\$ 98,253.00
Total (Use only on last page)							\$	\$

1 continuation sheets attached

Subtotal
(Total of this page)

Total
(Use only on last page)

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
				CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO.							
Erie County Common Pleas Court 323 Columbus Ave 2011 CV 0708 Sandusky, OH 44870			Assignee or other notification for: Wells Fargo Home Mortgag				
ACCOUNT NO.			VALUE \$				
Robert T. Kelsey 326 East Market Street 2011 CV 0708 Sandusky, OH 44870			Assignee or other notification for: Wells Fargo Home Mortgag				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)	\$	\$	
				Total (Use only on last page)	\$ 342,554.00	\$ 98,253.00	

(Report also on
Summary of
Schedules.)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 7620 Department Of Treasury Internal Revenue Service Kansas, MO 64999-0030	J					9,280.66	9,280.66	
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Totals of this page)	\$ 9,280.66	\$ 9,280.66	\$		
			Total (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$ 9,280.66				
			Total (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)		\$ 9,280.66	\$		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0489 Advance America 4920 Milan Rd Unit C Sandusky, OH 44870	W					0.00
ACCOUNT NO. 4716 American Education Services Harrisburg, PA 17130	W					58,945.00
ACCOUNT NO. 1200 AT & T PO Box 8212 Aurora, IL 60572-8212	H					146.59
ACCOUNT NO. EOS CCA 700 Longwater Drive Norwell, MA 02061		Assignee or other notification for: AT & T				
Subtotal (Total of this page)						\$ 59,091.59
Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$

7 continuation sheets attached

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
I C System Inc Po Box 64378 Saint Paul, MN 55164		Assignee or other notification for: AT & T			
ACCOUNT NO. 2596	J				589.99
Buckeye Cable System 5566 Southwyck Blvd Toledo, OH 43614					
ACCOUNT NO.	J				
Buckeye Lending Solutions 678 Bobcat Way Ste 200 Dublin, OH 43016					504.15
ACCOUNT NO.					
Jefferson Capital Systems 16 McLeland Rd Saint Cloud, MN 56303		Assignee or other notification for: Buckeye Lending Solutions			
ACCOUNT NO. 0171	W				
Capital One Bank 15000 Capital One Dr Richmond, VA 23238-1119					483.25
ACCOUNT NO.					
JC Christensen & Associates PO Box 519 Sauk Rapids, MN 56379-0519		Assignee or other notification for: Capital One Bank			
ACCOUNT NO.	H				
Cash Max 461 Milan Ave Norwalk, OH 44857					347.26
Sheet no. 1 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 1,924.65	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 1909 Erie Community Fcu 3311 Tiffin Av Sandusky, OH 44870	H				1,793.00
ACCOUNT NO. Excelsior College 7 Columbia Cir Albany, NY 12203-5156	W	Student Loans			1,695.00
ACCOUNT NO. 3426 Fifth Third Bank PO Box 630900 Cinnncinnati, OH 45263-0900	J				914.91
ACCOUNT NO. 0000 Frankenmuth Mutual Ins Company One Mutual Way Frankenmuth, MI 48787-0001	J				170.38
ACCOUNT NO. Access Receivables Management PO Box 9801 Towson, MD 21284-9801		Assignee or other notification for: Frankenmuth Mutual Ins Company			
ACCOUNT NO. 0382 FSON, Inc 26 W Main St Norwalk, OH 44857-1440	W				546.19
ACCOUNT NO. Gundlach Sheet Metal Works 910 Columbus Ave. Sandusky, OH 44870	H				363.00
Sheet no. 2 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 5,482.48	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
Transworld Systems Inc 2235 Mercury Way Ste 275 Santa Rosa, CA 95407		Assignee or other notification for: Gundlach Sheet Metal Works			
ACCOUNT NO. 0431	H				254.00
Hohler Furnace & Sheet Metal Co.,INC 110 Decatur St Sandusky, OH 44870					
ACCOUNT NO. 7940	W				950.30
HSBC Orchard Bank PO Box 60102 City Of Industry, CA 91716-0102					
ACCOUNT NO.		Assignee or other notification for: HSBC Orchard Bank			
Asset Recovery Solutions PO Box 1022 Wixom, MI 48393-1022					
ACCOUNT NO.		Assignee or other notification for: HSBC Orchard Bank			
Bureau Investments Group Portfolio NO 15 650 Dundee Rd Northbrook, IL 60062					
ACCOUNT NO. 7066	H				256.20
Ihor J. Danko 660 Dover Center Rd Bay Village, OH 44140					
ACCOUNT NO.	J				0.00
J & J Sales 1011 Sprowl Rd 14 CRA 295 Huron, OH 44839					
Sheet no. 3 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 1,460.50	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
Huron Municipal Court 417 Main St 14 CRA 295 Huron, OH 44839		Assignee or other notification for: J & J Sales			
ACCOUNT NO.					
Troy Wisehart 502 Washington St Calhoun, Kademenos & Childress L.P.A. Sandusky, OH 44870		Assignee or other notification for: J & J Sales			
ACCOUNT NO.	H				0.00
ACCOUNT NO.					
Sandusky Municipal Court 222 Meigs St CRA 1402657 A+B Sandusky, OH 44870-2835		Assignee or other notification for: Lyman Harbor			
ACCOUNT NO.					
Troy Wisehart 502 Washington St Calhoun, Kademenos, & Childress L.P.A. Sandusky, OH 44870		Assignee or other notification for: Lyman Harbor			
ACCOUNT NO.	J				351.30
ACCOUNT NO.					
Markel American Insurance Company P O Box 906 Pewaukee, WI 53072-0906					
ACCOUNT NO. 8600	H				26,204.00
National Payment Center POB 10528 Atlanta, GA 30348					
Sheet no. 4 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 26,555.30	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
Norwalk Dental Center 10 Stower Ln Suite C Norwalk, OH 44857	H				340.50
ACCOUNT NO. 3601					
Southern Automotive Fi PO Box 592277 Orlando, FL 32859	H				6,004.00
ACCOUNT NO.					
Yates & Schiller, P.A. 7900 Glades Rd, Suite 405 Boca Raton, FL 33434		Assignee or other notification for: Southern Automotive Fi			
ACCOUNT NO. 2769					
Sprint PO Box 4191 Carol Stream, IL 60197-4191	H				562.75
ACCOUNT NO.					
Cavalry Portfolio Services 500 Summit Lake Dr Ste 4A Valhalla, NY 10595-1340		Assignee or other notification for: Sprint			
ACCOUNT NO. 0017					
Stamps.com 1990 E Grand Ave El Segundo, CA 90245-5013	W				53.97
ACCOUNT NO. 4285					
The University of Akron 302 Buchtel Mall Akron, OH 44325-0001	J	Student Loans			7,523.10
Sheet no. 5 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		\$ 14,484.32
			Total		\$
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 6067	H				332.72
Trugreen 121 Keep Ct Elyria, OH 44035-2214					
ACCOUNT NO. 0001	J				2,664.51
Verizon PO Box 4002 Acworth, GA 30101					
ACCOUNT NO.	H				254.00
Victoria Financial Insurance C 22901 Millcreek Blvd Cleveland, OH 44122-5728					
ACCOUNT NO.		Assignee or other notification for: Victoria Financial Insurance C			
Credit Collection Servic Po Box 9134 Needham, MA 02494					
ACCOUNT NO. 1854	W				725.99
VIP Loan Shop PO Box 491406 Lawrenceville, GA 30049-0024					
ACCOUNT NO.		Assignee or other notification for: VIP Loan Shop			
National Check Resolution PO Box 491406 Lawrenceville, GA 30049					
ACCOUNT NO.	H				112.00
Weedman-norwalk 51 Benedict Ave Bldg 15 Norwalk, OH 44857-2127					
Sheet no. 6 of 7 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 4,089.22	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. National Recovery Agen 2491 Paxton St Harrisburg, PA 17111		Assignee or other notification for: Weedman--norwalk			
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <u>7</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	
			Total		
		(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
				\$ 113,088.06	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
WhyNot Leasing, LLC 1750 Elm St Ste 1200 Manchester, NH 03104-2907	Microwave, Grill, Leaf blower, Stereo

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Lisa Aaron 1966 E Oldgate St Sandusky, OH 44870-5164	Regional Acceptance Corp PO Box 830913 Birmingham, AL 35283

Fill in this information to identify your case:

Debtor 1 Troy L Aaron Sr.
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Ohio, Toledo Division

Case number 3:15-bk-33035
(If known)

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

- Employed
 Not employed

- Employed
 Not employed

Include part-time, seasonal, or self-employed work.

Occupation

Engine Assembly Tech

Occupation may include student or homemaker, if it applies.

Employer's name

Ford Motor Company

Employer's address

Henry Ford Way

Number Street

Number Street

Brookpark, OH 00000-0000

City State ZIP Code

City State ZIP Code

How long employed there? 19 years and 6 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 6,281.98

\$ _____

3. Estimate and list monthly overtime pay.

3. +\$ 0.00

+ \$ _____

4. Calculate gross income. Add line 2 + line 3.

4. \$ 6,281.98

\$ _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4. \$ 6,281.98	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,078.58	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ _____
5e. Insurance	5e. \$ 0.00	\$ _____
5f. Domestic support obligations	5f. \$ 0.00	\$ _____
5g. Union dues	5g. \$ 79.95	\$ _____
5h. Other deductions. Specify: See Schedule Attached	5h. + \$ 1,620.79	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 2,779.37	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,502.61	\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm <small>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</small>	8a. \$ 0.00	\$ _____
8b. Interest and dividends	8b. \$ 0.00	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive <small>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</small>	8c. \$ 0.00	\$ _____
8d. Unemployment compensation	8d. \$ 0.00	\$ _____
8e. Social Security	8e. \$ 0.00	\$ _____
8f. Other government assistance that you regularly receive <small>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____</small>	8f. \$ 0.00	\$ _____
8g. Pension or retirement income	8g. \$ 0.00	\$ _____
8h. Other monthly income. Specify: Overtime	8h. + \$ 1,600.00	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 1,600.00	\$ _____
10. Calculate monthly income. Add line 7 + line 9. <small>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.</small>	10. \$ 5,102.61	+ \$ _____ = \$ 5,102.61
11. State all other regular contributions to the expenses that you list in Schedule J.		
<small>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.</small>		
<small>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.</small>		
<small>Specify: _____</small>		
11. + \$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. <small>Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies</small>		
12. \$ 5,102.61		
Combined monthly income		
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: None		

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)
Continuation Sheet - Page 1 of 1

	DEBTOR	SPOUSE
Other Payroll Deductions:		
FICA	402.74	
United Fund	19.33	
Credit Union	874.42	
Loan	144.34	
OLIP	4.68	
DLIP	1.17	
OAIP	5.46	
Garnishment	168.65	

Fill in this information to identify your case:

Debtor 1 **Troy L Aaron Sr.**
First Name _____ Middle Name _____ Last Name _____

Debtor 2
(Spouse, if filing) First Name _____ Middle Name _____ Last Name _____

United States Bankruptcy Court for the: Northern District of Ohio, Toledo Division

Case number **3:15-bk-33035**
(if known)

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:
 MM / DD / YYYY
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4.	\$ 1,600.00
4a.	\$ 0.00
4b.	\$ 0.00
4c.	\$ 0.00
4d.	\$ 0.00

Your expenses	
5. Additional mortgage payments for your residence, such as home equity loans	\$ 0.00
6. Utilities:	
6a. Electricity, heat, natural gas	\$ 240.00
6b. Water, sewer, garbage collection	\$ 65.00
6c. Telephone, cell phone, Internet, satellite, and cable services	\$ 210.00
6d. Other. Specify: <u>See Schedule Attached</u>	\$ 68.00
7. Food and housekeeping supplies	
8. Childcare and children's education costs	\$ 0.00
9. Clothing, laundry, and dry cleaning	
10. Personal care products and services	\$ 40.00
11. Medical and dental expenses	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	\$ 130.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	
14. Charitable contributions and religious donations	\$ 25.00
14. Charitable contributions and religious donations	\$ 20.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	\$ 0.00
15b. Health insurance	\$ 0.00
15c. Vehicle insurance	\$ 414.00
15d. Other insurance. Specify: _____	\$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	\$ 0.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	\$ 0.00
17b. Car payments for Vehicle 2	\$ 468.00
17c. Other. Specify: <u>See Schedule Attached</u>	\$ 270.00
17d. Other. Specify: _____	\$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	\$ 0.00
19. Other payments you make to support others who do not live with you. Specify: <u>See Schedule Attached</u>	\$ 750.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	\$ 0.00
20b. Real estate taxes	\$ 0.00
20c. Property, homeowner's, or renter's insurance	\$ 0.00
20d. Maintenance, repair, and upkeep expenses	\$ 0.00
20e. Homeowner's association or condominium dues	\$ 0.00

21. Other. Specify: _____

21. +\$ **0.00**

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ **4,585.00**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ **5,102.61**

23b. Copy your monthly expenses from line 22 above.

23b. -\$ **4,585.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ **517.61**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.**None**

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)
Continuation Sheet - Page 1 of 1

Other Utilities	
Cable And Internet	50.00
Garbage	18.00
	0.00
Other Installment Payments	
Motorcycle	180.00
Sears Lease Payment	65.00
Ez Pass	25.00
	0.00
Other payments you make to support others who do not live with you (Debtor)	
Collegae Tuition	750.00
	0.00

IN RE Aaron, Troy L Sr.

Debtor(s)

Case No. 3:15-bk-33035

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 28 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: October 9, 2015Signature: /s/ Troy L Aaron
Troy L Aaron

Debtor

Date: _____ Signature: _____

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Ohio, Toledo Division

IN RE:**Aaron, Troy L Sr.**Case No. 3:15-bk-33035Chapter 13

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
148,742.00	2013 Gross Income
152,000.00	2012 Gross Income
0.00	2014 YTD Gross Income
26,000.00	Gross Income 2015

Husbands Wages

4,686.00	2015 Gross Wages Wife (North Coast)
5,033.00	2015 Gross Wages YTD wife

Tri C College

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.* If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
State of Ohio v Troy Aaron CRA # CRA 1402657	bad checks	Sandusky Municipal Court Sandusky, Ohio	default judgment

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None a. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None a. List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Donald Harris Law Firm 158 Columbus Ave. Sandusky, OH 44870-2549		
DebtHelper.Com 4611 Okeechobee Blvd Ste 114 West Palm Beach, FL 33417-4637	11/10/14	50

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

- a.** If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.*

*If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.*

- b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: October 9, 2015

Signature /s/ *Troy L Aaron*

Signature
of Debtor

Troy L Aaron

Date:

Signature _____
of Joint Debtor
(if any)

0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

**United States Bankruptcy Court
Northern District of Ohio, Toledo Division**

IN RE:

Aaron, Troy L Sr.

Debtor(s)

Case No. 3:15-bk-33035

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 1,500.00
Prior to the filing of this statement I have received	\$ 500.00
Balance Due	\$ 1,000.00

2. The source of the compensation paid to me was: Debtor Other (specify): _____
3. The source of compensation to be paid to me is: Debtor Other (specify): _____
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 9, 2015

Date

/s/ Donald Harris

Donald Harris 485340
Don Harris Law Firm
158 Columbus Ave
Sandusky, OH 44870-2502
(419) 621-9388 Fax: (419) 239-2315
don@donaldharrislawfirm.com

**United States Bankruptcy Court
Northern District of Ohio, Toledo Division**

IN RE:

Aaron, Troy L Sr.

Debtor(s)

Case No. 3:15-bk-33035

Chapter 13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: October 9, 2015

Signature: /s/ Troy L Aaron
Troy L Aaron

Debtor

Date: _____

Signature: _____

Joint Debtor, if any

Access Receivables Management
PO Box 9801
Towson, MD 21284-9801

Advance America
4920 Milan Rd Unit C
Sandusky, OH 44870

American Education Services
Harrisburg, PA 17130

Asset Recovery Solutions
PO Box 1022
Wixom, MI 48393-1022

AT & T
PO Box 8212
Aurora, IL 60572-8212

Buckeye Cable System
5566 Southwyck Blvd
Toledo, OH 43614

Buckeye Lending Solutions
678 Bobcat Way Ste 200
Dublin, OH 43016

Bureau Investments Group Portfolio NO 15
650 Dundee Rd
Northbrook, IL 60062

Capital One / Yamaha
26525 N Riverwoods Blvd
Mettawa, IL 60045

Capital One Bank
15000 Capital One Dr
Richmond, VA 23238-1119

Cash Max
461 Milan Ave
Norwalk, OH 44857

Cavalry Portfolio Services
500 Summit Lake Dr Ste 4A
Valhalla, NY 10595-1340

Credit Collection Service
Po Box 9134
Needham, MA 02494

Department Of Treasury
Internal Revenue Service
Kansas, MO 64999-0030

EOS CCA
700 Longwater Drive
Norwell, MA 02061

Erie Community Fcu
3311 Tiffin Av
Sandusky, OH 44870

Erie County Common Pleas Court
323 Columbus Ave 2011 CV 0708
Sandusky, OH 44870

Excelsior College
7 Columbia Cir
Albany, NY 12203-5156

Fifth Third Bank
PO Box 630900
Cincinnati, OH 45263-0900

Frankenmuth Mutual Ins Company
One Mutual Way
Frankenmuth, MI 48787-0001

FSON, Inc
26 W Main St
Norwalk, OH 44857-1440

Gundlach Sheet Metal Works
910 Columbus Ave.
Sandusky, OH 44870

Hohler Furnace & Sheet Metal Co., INC
110 Decatur St
Sandusky, OH 44870

HSBC Orchard Bank
PO Box 60102
City Of Industry, CA 91716-0102

Huron Municipal Court
417 Main St 14 CRA 295
Huron, OH 44839

I C System Inc
Po Box 64378
Saint Paul, MN 55164

Ihor J. Danko
660 Dover Center Rd
Bay Village, OH 44140

J & J Sales
1011 Sprowl Rd 14 CRA 295
Huron, OH 44839

JC Christensen & Associates
PO Box 519
Sauk Rapids, MN 56379-0519

Jefferson Capital Systems
16 McLeland Rd
Saint Cloud, MN 56303

Lisa Aaron
1966 E Oldgate St
Sandusky, OH 44870-5164

Lyman Harbor
1615 First St CRA 1402657A, CRA 1402657B
Sandusky, OH 44870

Markel American Insurance Company
P O Box 906
Pewaukee, WI 53072-0906

National Check Resolution
PO Box 491406
Lawrenceville, GA 30049

National Payment Center
POB 10528
Atlanta, GA 30348

National Recovery Agen
2491 Paxton St
Harrisburg, PA 17111

Nationwide Cassel Llc
One Nationawide Plaza
Columbus, OH 43215-2220

Norwalk Dental Center
10 Stower Ln Suite C
Norwalk, OH 44857

Regional Acceptance Corp
PO Box 830913
Birmingham, AL 35283

Robert T. Kelsey
326 East Market Street 2011 CV 0708
Sandusky, OH 44870

Sandusky Municipal Court
222 Meigs St CRA 1402657 A+B
Sandusky, OH 44870-2835

Southern Automotive Fi
PO Box 592277
Orlando, FL 32859

Sprint
PO Box 4191
Carol Stream, IL 60197-4191

Stamps.com
1990 E Grand Ave
El Segundo, CA 90245-5013

The University of Akron
302 Buchtel Mall
Akron, OH 44325-0001

Transworld Systems Inc
2235 Mercury Way Ste 275
Santa Rosa, CA 95407

Troy Wisehart
502 Washington St
Calhoun, Kademenos, & Childress L.P.A.
Sandusky, OH 44870

Troy Wisehart
502 Washington St
Calhoun, Kademenos & Childress L.P.A.
Sandusky, OH 44870

Trugreen
121 Keep Ct
Elyria, OH 44035-2214

Verizon
PO Box 4002
Acworth, GA 30101

Victoria Financial Insurance C
22901 Millcreek Blvd
Cleveland, OH 44122-5728

VIP Loan Shop
PO Box 491406
Lawrenceville, GA 30049-0024

Weedman--norwalk
51 Benedict Ave Bldg 15
Norwalk, OH 44857-2127

Wells Fargo Home Mortgag
8480 Stagecoach Cir 2011 CV 0708
Frederick, MD 21701

WhyNot Leasing, LLC
1750 Elm St Ste 1200
Manchester, NH 03104-2907

Yates & Schiller, P.A.
7900 Glades Rd, Suite 405
Boca Raton, FL 33434

Fill in this information to identify your case:Debtor 1 Troy L Aaron Sr.
First Name Middle Name Last NameDebtor 2
(Spouse, if filing) First Name Middle Name Last NameUnited States Bankruptcy Court for the: **Northern District of Ohio, Toledo Division**Case number 3:15-bk-33035
(if known)**Check as directed in lines 17 and 21:**

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
3. The commitment period is 3 years.
4. The commitment period is 5 years.

 Check if this is an amended filing**Official Form 22C-1****Chapter 13 Statement of Your Current Monthly Income
and Calculation of Commitment Period**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income**1. What is your marital and filing status? Check one only.**

- Not married. Fill out Column A, lines 2-11.
- Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

<i>Column A</i> Debtor 1	<i>Column B</i> Debtor 2 or non-filing spouse
------------------------------------	---

\$ 6,110.89 \$ 0.00**3. Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.\$ 0.00 \$ 0.00**4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.\$ 0.00 \$ 0.00**5. Net income from operating a business, profession, or farm**Gross receipts (before all deductions) \$ 0.00Ordinary and necessary operating expenses - \$ 0.00Net monthly income from a business, profession, or farm \$ 0.00 \$ 0.00

Copy here →

6. Net income from rental and other real propertyGross receipts (before all deductions) \$ 0.00Ordinary and necessary operating expenses - \$ 0.00Net monthly income from rental or other real property \$ 0.00 \$ 0.00

Copy here →

**Column A
Debtor 1**

**Column B
Debtor 2 or
non-filing spouse**

7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00
8. Unemployment compensation	\$ 0.00	\$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: **↓**

For you \$ **0.00**
 For your spouse \$ **0.00**

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$ 0.00
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10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.	
10a.	\$ \$
10b.	\$ \$
10c. Total amounts from separate pages, if any.	+ \$ 0.00 + \$ 0.00

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 6,110.89	+ \$ 0.00	= \$6,110.89
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Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ **6,110.89**

13. Calculate the marital adjustment. Check one:

- You are not married. Fill in 0 in line 13d.
- You are married and your spouse is filing with you. Fill in 0 in line 13d.
- You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13d.

13a. Retained by spouse \$ 189.88
13b. \$
13c. + \$
13d. Total \$ 189.88 Copy here. ➔ 13d. — 189.88

14. Your current monthly income. Subtract line 13d from line 12. 14. \$ **5,921.01**

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here ➔ 15a. \$ **5,921.01**

Multiply line 15a by 12 (the number of months in a year). **x 12**

15b. The result is your current monthly income for the year for this part of the form. 15b. \$ **71,052.12**

16. Calculate the median family income that applies to you. Follow these steps:16a. Fill in the state in which you live. **Ohio**16b. Fill in the number of people in your household. **2**16c. Fill in the median family income for your state and size of household. 16c. \$ **54,420.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3.* Do NOT fill out *Calculation of Disposable Income* (Official Form 22C-2).
- 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2).* On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)18. Copy your total average monthly income from line 11. 18. \$ **6,110.89**

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d.

If the marital adjustment does not apply, fill in 0 on line 19a.

19a. — \$ **189.88****Subtract line 19a from line 18.**19b. \$ **5,921.01****20. Calculate your current monthly income for the year.** Follow these steps:20a. Copy line 19b. 20a. \$ **5,921.01**

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form.

20b. \$ **71,052.12**

20c. Copy the median family income for your state and size of household from line 16c.

\$ **54,420.00****21. How do the lines compare?**

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X
/s/ Troy L Aaron
 Signature of Debtor 1

X
 Signature of Debtor 2

Date **October 9, 2015**
 MM / DD / YYYYDate _____
 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1 Troy L Aaron Sr. First Name _____ Middle Name _____ Last Name _____

Debtor 2
(Spouse, if filing) _____ First Name _____ Middle Name _____ Last Name _____

United States Bankruptcy Court for the: **Northern District of Ohio, Toledo Division**

Case number 3:15-bk-33035 (If known) _____

Check if this is an amended filing

Official Form 22C–2

Chapter 13 Calculation of Your Disposable Income

12/14

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 22C–1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,092.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age7a. Out-of-pocket health care allowance per person \$ **60.00**7b. Number of people who are under 65 X **2**7c. Subtotal. Multiply line 7a by line 7b. \$ **120.00** Copy line 7c here → \$ **120.00****People who are 65 years of age or older**7d. Out-of-pocket health care allowance per person \$ **144.00**7e. Number of people who are 65 or older X **0**7f. Subtotal. Multiply line 7d by line 7e. \$ **0.00** Copy line 7f here → + \$ **0.00**7g. **Total.** Add lines 7c and 7f..... \$ **120.00** Copy total here → 7g. \$ **120.00****Local Standards**

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ **545.00**

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ **955.00**

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor

Average monthly payment

Wells Fargo Home Mortgag\$ **1,300.00**

\$ _____

+ \$ _____

9b. Total average monthly payment

\$ **1,300.00**

Copy line 9b here →

-\$ **1,300.00**

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this number is less than \$0, enter \$0.

\$ **0.00**

Copy 9c here →

\$ **0.00**

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$ **0.00**

Explain why: _____

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

0. Go to line 14.
 1. Go to line 12.
 2 or more. Go to line 12

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ **0.00****13. Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.**Vehicle 1**Describe
Vehicle 1:**Ford F 150**13a. Ownership or leasing costs using IRS Local Standard 13a. \$ **0.00**13b. Average monthly payment for all debts secured by Vehicle 1.
Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e,
add all amounts that are contractually due to each secured
creditor in the 60 months after you file for bankruptcy. Then
divide by 60.

Name of each creditor for Vehicle 1

Average monthly
payment**Nationwide Cassel Llc**\$ **264.00**Copy 13b
here ➔— \$ **264.00**Repeat this amount
on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. 13c.

\$ **0.00**Copy net Vehicle 1
expense here ➔\$ **0.00****Vehicle 2**Describe
Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard

13d. \$ **0.00**13e. Average monthly payment for all debts secured by Vehicle 2.
Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2

Average monthly
payment**Regional Acceptance Corp**\$ **565.78**

Copy here ➔

— \$ **565.78**Repeat this amount
on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this number is less than \$0, enter \$0. 13f.

\$ **0.00**Copy net Vehicle 2
expense here ➔\$ **0.00**14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.\$ **184.00**15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.\$ **0.00**

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. **\$1,032.11**
Do not include real estate, sales, or use taxes.
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. **\$ 74.23**
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.
18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. **\$ 0.00**
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. **\$ 0.00**
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.
20. **Education:** The total monthly amount that you pay for education that is either required:
 as a condition for your job, or **\$ 0.00**
 for your physically or mentally challenged dependent child if no public education is available for similar services.
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. **\$ 0.00**
Do not include payments for any elementary or secondary school education.
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. **\$ 0.00**
Payments for health insurance or health savings accounts should be listed only in line 25.
23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. **+ \$ 0.00**
Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 22C-1, or any amount you previously deducted.
24. **Add all of the expenses allowed under the IRS expense allowances.** **\$3,047.34**
Add lines 6 through 23.

Additional Expense Deductions These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	\$ 0.00
Disability insurance	\$ 0.00
Health savings account	+ \$ 0.00
Total	\$ 0.00

Copy total here ➔

\$ 0.00

Do you actually spend this total amount?

No. How much do you actually spend? **\$ 0.00**
 Yes

26. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. **\$ 0.00**

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. **\$ 0.00**

By law, the court must keep the nature of these expenses confidential.

28. **Additional home energy costs.** Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs. \$ 0.00

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. \$ 0.00

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. \$ 0.00

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). + 0.00

Do not include any amount more than 15% of your gross monthly income.

32. **Add all of the additional expense deductions.**

Add lines 25 through 31. \$ 0.00

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment

Mortgages on your home

33a. Copy line 9b here → \$ 1,300.00

Loans on your first two vehicles

33b. Copy line 13b here. → \$ 264.00

33c. Copy line 13e here. → \$ 565.78

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
33d. <u>Capital One / Yamaha</u>	<u>motorcycle</u>	<input checked="" type="checkbox"/> No \$ <u>173.45</u> <input type="checkbox"/> Yes	
33e. <u>Nationwide Cassel Llc</u>	<u>Automobile (1)</u>	<input checked="" type="checkbox"/> No \$ <u>264.00</u> <input type="checkbox"/> Yes	
33f. <u>See Continuation Sheet</u>		<input type="checkbox"/> No + \$ <u>1,865.78</u> <input type="checkbox"/> Yes	
33g. Total average monthly payment. Add lines 33a through 33f.		\$ <u>2,303.23</u>	Copy total here → \$ <u>2,303.23</u>

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
<u>Nationwide Cassel Llc</u>	<u>Automobile (1)</u>	\$ <u>6,008.40</u>	\$ <u>100.14</u>
<u>Wells Fargo Home Mortgag</u>	<u>Residence</u>	\$ <u>90,000.00</u>	\$ <u>1,500.00</u>
		\$ _____	\$ _____
		\$ _____	\$ _____
		Total	\$ <u>1,600.14</u>
			Copy total here → \$ 1,600.14

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.Total amount of all past-due priority claims. \$ 9,280.66 ÷ 60 \$ 154.68**36. Projected monthly Chapter 13 plan payment**

\$ _____

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

X _____

Average monthly administrative expense

\$ _____ \$ _____

37. Add all of the deductions for debt payment. Add lines 33g through 36.\$ **4,058.05****Total Deductions from Income****38. Add all of the allowed deductions.**Copy line 24, All of the expenses allowed under IRS expense allowances..... \$ 3,047.34Copy line 32, All of the additional expense deductions..... \$ 0.00Copy line 37, All of the deductions for debt payment..... + \$ 4,058.05

Total deductions

\$ 7,105.39 **Copy total here → \$ 7,105.39**

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 14 of Form 22C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.** \$ 5,921.01

40. **Fill in any reasonably necessary income you receive for support for dependent children.**

The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 22C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ 0.00

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ 0.00

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here ➔ \$ 7,105.39

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
43a. _____	\$ _____
43b. _____	\$ _____
43c. _____	+ \$ _____
43d. Total. Add lines 43a through 43c.....	\$ 0.00 ➔ +\$ 0.00
44. Total adjustments. Add lines 40 and 43d.	\$ 7,105.39 ➔
	Copy 43d here ➔ Copy total here ➔ - \$7,105.39
45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.	\$ -1,184.38

Part 3: Change in Income or Expenses

46. **Change in income or expenses.** If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 22C-1	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-2	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-2	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-2	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ _____

Part 4:

Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Troy L Aaron

Signature of Debtor 1

X

Signature of Debtor 2

Date **October 9, 2015**
MM / DD / YYYY

Date _____
MM / DD / YYYY

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME
Continuation Sheet - Future payments on secured claims

Name of Creditor	Property Securing the Debt	60-month Average Pmt	Does payment include taxes or insurance?
Regional Acceptance Corp	Automobile (2)	565.78	No
Wells Fargo Home Mortgag	Residence	1,300.00	No